Physical & Behavioral Health Integration (BHI): Strategies to Overcome Implementation Barriers

### March 23, 2017

A Department of Social Services PCMH Presentation Hosted by Community Health Network of CT, Inc.





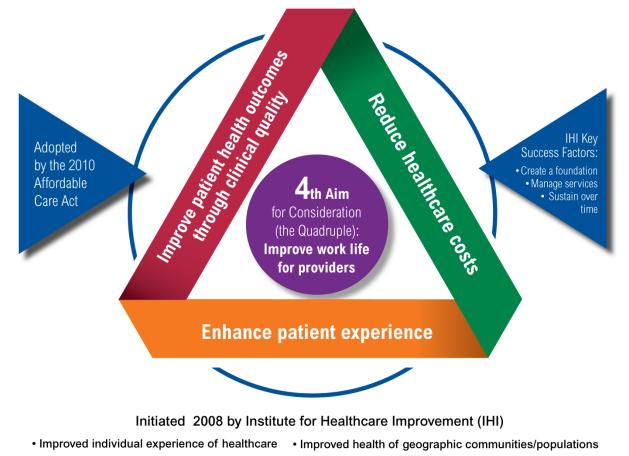
# Learning Objectives

- Explain why behavioral health is an important element to incorporate in the Person-Centered Medical Home (PCMH)
- Define common integration barriers
- Understand your current level of integration between physical and behavioral health
- Gain insight into applying strategies to overcome barriers and sustain BHI
- Identify available resources to support BHI in your practice



#### **Triple Aim**

#### Act with the Individual, Learn for the Population



• Reduction of per capital costs

"[Pursuing the Triple Aim: The First 7 Years]. Cambridge, Massachusetts: Institute for Healthcare Improvement; [2015]. (Available on www.IHI.org)" "[System-Minded Design: Optimizing the Microsystem for Workforce Development]. Cambridge, Massachusetts: Institute for Healthcare Improvement; [2015]. (Available on www.IHI.org)"

## NCQA Standards

- Identify high-risk patients who may benefit from care management through a comprehensive health assessment, and use evidencebased guidelines to plan and manage their care
  - Social determinants of health
  - Behavioral health conditions
  - High cost/utilization
  - Poorly controlled or complex conditions
- Maintain agreements with and incorporate behavioral health care providers within the practice site
- Improve clinical quality of care, efficiency, and patient experience for vulnerable patients

#### **BHI Models**

#### **Consultative Model**

 Psychiatrists and other behavioral health clinicians see patients for consultations in their offices – away from primary care

#### **Co-located Model**

 Psychiatrist and behavioral health clinicians see patients in primary care settings

#### **Collaborative Model**

 Psychiatrist and other behavioral health clinicians work closely in providing caseload consultation with Primary Care Providers (PCPs)

#### Consult, Coordinate, Collaborate

#### Consult

A care team member with a specific level of expertise seeks professional advice from another clinician with different or expert professional experience

Clinicianto-Clinician Interaction

#### Coordinate

Two or more clinicians working in a parallel manner with the same outcome goal in mind, but working independently from each other

#### Collaborate

Behavioral and primary care clinicians work together to identify, treat and assess a particular patient

Integrating Behavioral Health and Primary Care: Consulting, Coordinating and Collaborating Among Professionals; Cohen, et al., doi: 10.3122/jabfm.2015.S1.150042 Health Insurance Portability and Accountability Act (HIPAA)

#### HIPAA Privacy Rule

- Assures protection of an individual's health information
- Facilitates sharing of health information needed to provide and promote the highest quality of care
- Protects the public's health and well-being
- Is flexible and comprehensive in covering the disclosures that need to be addressed

#### Exception

 Stricter state laws or rules for substance abuse treatment facilities (42 CFR Part 2)

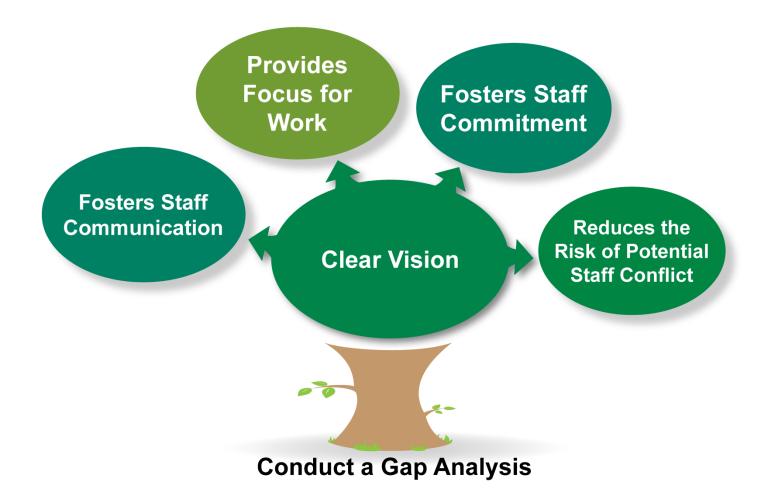
## Common Integration Barriers at the Practice Level



# Understand Your Current Level of BHI



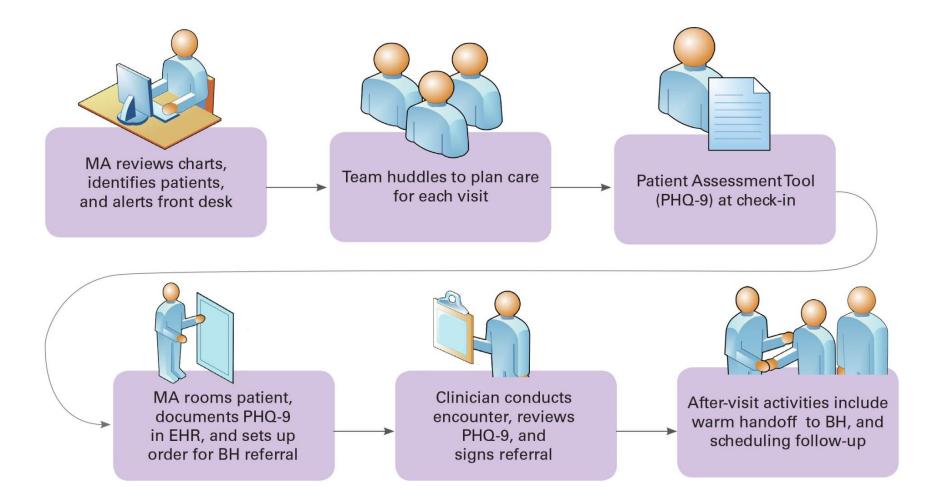
#### **Gap Analysis**



### **GROW Pathway to Integration Tool**



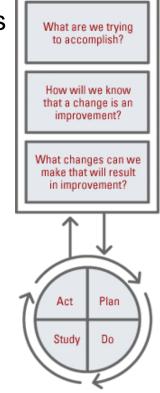
### **Depression Screening Workflow**



Safety Net Medical Home Initiative. Ratzliff A. Organized, Evidence-Based Care Supplement: Behavioral Health Integration. Phillips KE, Holt BS, eds. Seattle, WA: Qualis Health, MacColl Center for Health Care Innovation at the Group Health Research Institute, and the University of Washington's AIMS Center; 2014.

# Ongoing Quality Improvement (QI) Process

- Evaluate behavioral health measures based on data/reports
- Choose and define QI project
  - Assess workflows for potential improvements
  - Choose realistic, attainable, and measurable goals
  - Establish timeline for implementation and achievement of each goal
- Complete QI project to implement improvement
- Assess for goal achievement
- Sustain improvement



#### The QI process is continuous and cyclical, never stagnant

# CareMedica - Primary Care

#### Feedback From an Integrated Practice

## Common Integration Barriers at the Practice Level



## **Care Team Staffing**

- Care team structure and schedules
- Patient involvement
- State licensing



## **Clinical Skill Set**

- Training new staff and existing staff
- Communicating effectively
- Documentation requirements



## **Medication Management**

- Medication management protocol
- Strategies for optimizing adherence
- Care team roles in supporting medication therapy



## **Patient Population Stratification**

- Identifying patients with behavioral health conditions
- Risk stratification
- Utilization data from insurer or other source



### **Referral Resources**

- Identify community resources
- Consider population needs
- Assess usefulness of community resources



## **Space Availability**

- Patient encounter suitability
- Professional proximity
- Private working space



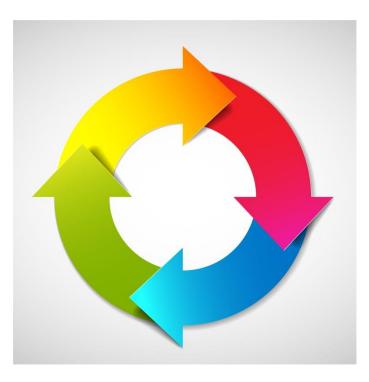
### **Financial Resources**

- Identify funding sources to implement and sustain BHI
- Financial benefits to BHI
- Identify billable codes in your state



#### **Workflow Processes**

- BHI workflow processes
- Ongoing QI process
- Consider patient and family feedback



# **BHI Key Success Factors**

- Allocate appropriate time to plan
- Transform practice culture
- Train staff to implement and sustain integration
- Assess and manage capacity realistically
- Identify internal champions and external stakeholders
- Utilize available and free resources



#### Resources



- By email: <u>pathwaytopcmh@chnct.org</u>
- By phone: 203.949.4194
- Online: www.huskyhealthct.org/providers/pcmh.html
  - CT Behavioral Health Partnership (CT BHP): <u>www.ctbhp.com</u>
- All PCMH webinars located on the HUSKY Health website page "<u>Pathway to PCMH Webinar Recordings</u> and Presentation Materials"

# Questions?